PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
	PATENT A	RD		4	150	100	3-03	175						
CLAIMS AS FILED - PART I								SMALL ENTITY				OTHER	THAN	
TO	TAL CLAIMS		(Column 1)		(Column 2)		/	TYPE			OR	SMALL		
TOTAL CLAIMS			54					—		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 355.		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			34 minus 20=		. 14			X\$ 9=			OR	X\$18=	252	
INDEPENDENT CLAIMS			/5 minus 3 =		12		Ţ.	X40=			OR	X80=	960	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=				+270=		
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2				TOTAL			OR OR	TOTAL	1922	
CLAIMS AS AMENDED - PART II								.017			IOU	OTHER		
(Column 1) (Column 2) (Column 3)								SMALL ENTITY			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=	-		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE			PENDEN]				1	070			
								+135			OR	+270=		
								TO: Addit. F		<u>. </u>	OR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										1	_	.==:	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA	$\ \ $	RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• .	Minus	**		=]	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		<u> </u>	X40=		=		OR	X80=		
L	FIRST PRESE	ULTIPLE DEPENDENT CLAIN				455				070				
								+135			OR	+270=		
									EE		OR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	\prod	X\$ 9:	= {		OR	X\$18=		
	Independent	•	Minus	***		=	1	X40=				X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1		OR			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
		mber Previously P nber Previously Pa					er fou	ınd in the	apr	oropriate bo	x in col	lumn 1.		